2700 INTERNAL TRANSFER REQUEST FOR S.N.		0 8 28/,813	
DATE: 9/26	FROM:	Lea	(print name)
	REASON(S):		
FORWARD TO: 273	A. You had Parent	(check bax)	
A. Art Unit:	B. See Title	(check box)	
B. Class: 32/222	_ C. See Abstract	(check box)	
C Subclass: 222	D. See Claim(s):		
FURTHER EXPLANATION IF NE	EDED:		
Course	inication devi	-, J.E. Me	eden.
DATE:	FROM:		(print name)
	REASON(S):		
FORWARD TO:	A. You had Parent	(check box)	
A. Art Unit:	B. See Title	(check box)	
B. Class:	C. See Abstract	(check box)	
C Subclass:	D. See Claim(s):		
DATE:	FROM:	·	(print name)
	REASON(S):		
FORWARD TO CLASSIFIER	A. You had Parent	(check box)	
	B. See Title	(check box)	
	C. See Abstract	(check box)	
	D. See Claim(s):		
FURTHER EXPLANATION IF NE	EDED:		
DISPOSITION BY 2700 CL	ASSIFICATION		
DATE:	CLASSIFIER:		
	REASON(S):		
FORWARD TO:	A. You had Parent	(check box)	
A. Art Unit:	B. See Title	(check box)	
B. Class:	C. See Abstract	(check box)	
C Subclass:	D. See Claim(s):		

**FURTHER EXPLANATION IF NEEDED:**